Filing

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(37 CFR 1.63) □ Declaration Declaration Submitted after Initial OR Submitted Filing (surcharge with Initial (37 CFR 1.16 (e))

required)

Attorney Docket Number		913.6600CIP					
First Named Inventor		Li Fang					
COMPLE	TE IF I	KNOWN					
Application Number							
Filing Date	Apri	1 19, 2000					
Group Art Unit							
Examiner Name							

As a below named inventor, I hereby declare										
My residence, post office address, and citizenship are as stated below next to my name.										
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:  COLD-SHOCK REGULATORY ELEMENTS, CONSTRUCTS THEREOF, AND METHODS OF										
COLD-SHOCK REGULATO	ORY ELEMENTS	s, constructs the	LKEOF, AND							
the specification of which	(Title	of the Invention)								
is attached hereto OR was filed on (MM/DD/YYYY)	April 19, 2000	as United	States Application N	lumber or PCT International						
Application Number		s amended on (MM/DD/YYYY)		(if applicable).						
I hereby state that I have reviewed and u amended by any amendment specifically I acknowledge the duty to disclose inform	Telefica to assist			laims, as						
I hereby claim foreign priority benefits un any PCT international application which o below, by checking the box, any foreign that of the application on which priority is	der 35 U.S.C. 119(a)-(designated at least one pplication for patent or	i) or 365(b) of any foreign appli	cation(s) for patent	or inventor's certificate, or 365(a) of listed below and have also identified application having a filing date before						
Prior Foreign Application		Foreign Filling Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO						
Number(s)	Country	(MINIODATTT)	0000							
			vonuen - Heebed h	ereto:						
Additional foreign application number	rs are listed on a supple	emental priority data sheet PTO	s) listed below.	eroto.						
I hereby claim the benefit under 35 U.	S.C. 119(e) of any Unite	(MAM/DD/VVV)	o,							
Application Number(s) 60/096,938 60/143,380	Filing Date August 20, 19	(MM/DD/YYYY)	Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.							

[Page 1 of 2]

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OMB control number.

### **DECLARATION --** Supplemental Priority Data Sheet

Additional foreign applications:										
Prior Foreign Application		Earsian	Filing Date	Dui a vita	Certified Copy Attached?					
Number(s)	Country	(MM/D	D/YYYY)	Priority Not Claimed	YES NO					
			·							
Additional provisional applications:										
Applic		Filing Date (MM/DD/YYYY)								
Additional U.S. applicati	ons:	· · · · · · · · · · · · · · · · · · ·	···							
U.S. Parent Applica Number	ation PCT Paren	t	Parent Fil (MM/DD/		Parent Patent Number (if applicable)					
07/852,013										

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### DECLARATION—Utility or Design Patent Application

<del></del>														
I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.														
U.S. Parent Application or PCT Parent Number							Parent Filing Date (MM/DD/YYYY)				Parent Patent Number (if applicable)			
PCT/US99/1								il 20, 19						-
09/293,427	.,,,,,,							il 16, 19						
08/769,945								December 19, 1996						
08/203,806							Mar	ch 1, 19	994					
Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.  As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent														
As a named invent and Trademark Of			N-74		ictitioner( er Numbe			applicatio	n and	to transact	all busine	ess in the	Place Custom	er
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Additional res	nistered or	actitioner(s) name	id on supp	lemental	Register	ed Practition	er Infor	mation sh	aat D	TO/SB/02C	attached	hereto		
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Direct all corres	pondenc	e to:	Custome Bar Cod			022469	) 			OR	co	rrespor	ndence address	below
Name	Gerard	l Weiser - IP	Departn	nent										
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Address	1600 N	Market Street,	Suite 3	3600								ı———		
City	Philad	elphia					s	tate	PA	·	ZIP	1910	3	
Country	US			Te	lephone	215-	751-2	427			Fax	215-	751-2658	
further that these	statement	itements made he s were made with villful false stateme	the knowle	edge that	t willful fa	lse stateme	nts and	the like so	o mad	de are punis	hable by	and belie fine or in	ef are believed to nprisonment, or b	be true; and oth, under 18
Name of Sole	or First	Inventor:						A petitio	n ha	s been file	d for thi	s unsigi	ned inventor	
Giv	ven Nam	e (first and mide	dle (if anv	/1)						Family	Name o	r Surna	me	
Li							Fa	ng						
Inventor's Signature							- 1						Date	
Residence: C	ity	New York			State	NY		Country US Citizenship						
Post Office Ad	dress	Apartment 883, 50 98th Street												
Post Office Ad	Idress													
City		New York	State	NY		ZIF	. 10	0029			Cou	ntry	US	
Additional investors are being period on the 1 supplemental Additional Inventor(a) sheet(a) PTO/SR/02A attached hereto														

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#### **DECLARATION**

# ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 2

Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor										entor
Given Nar	me (first and middle [if any]			Family Na	me or S	Surname				
Weining		Jiang								
Inventor's Signature										
Residence: City	New York	State	NY	NY Country US Citiz					ip	
Post Office Address	Apartment 2H, 430 East 63rd Street									
Post Office Address										
City	New York	State	NY		ZIP	10021	Country	, US	<u> </u>	
Name of Addition	al Joint Inventor, if an	y:			A petitio	on has been file	ed for th	is unsign	ed inve	entor
Given Na		Family Name or Surname								
Masanori	Masanori Mitta									
Inventor's Signature								Dat	te	
Residence: City	Kyoto	State			Country	Japan		Citizen	ship	
Post Office Address	42-14-2-321, Hensyowa	re, Jusau	chi, Ta	nabe-cl	no, Tsu	zuki-gun		,,,		
Post Office Address						•				
City	Kyoto	State			ZIP	610-03	Cour	ntry Ja	apan	
Name of Addition	al Joint Inventor, if an	y:			A petition	on has been file	ed for th	is unsign	ed inv	entor
Given Na	me (first and middle [if any	])				Family Na	me or S	Surname		
Masayori				Inou	ye					_,
Inventor's Signature								Da	te	
Residence: City	Piscataway	State	NJ		Country	US		Citizer	nship	
Post Office Address	Apartment 107B, 280 Ri	iber Road	i							<u> </u>
Post Office Address					·_					
City	Piscataway	State	NJ	ZIP 08854 Country US						

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#### **DECLARATION**

# ADDITIONAL INVENTOR(S) Supplemental Sheet Page 2 of 2

Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor										
Given Nar	me (first and middle [if any])	)		Family Name or Surname						
Jean-Pierre		Etche	Etchegaray							
Inventor's Signature								Date		
Residence: Ćity	Highland Park	State	NY		Country	US		Citizensh	nip	
Post Office Address	223 L:incoln Avenue			····						
Post Office Address										
City	Highland Park	State	NJ	*	ZIP	08904	Country	y US	œ	·
Name of Addition	al Joint Inventor, if any	/:			A petitio	on has been file	ed for th	nis unsign	ed inve	entor
Given Name (first and middle [if any]) Family Name or Surname										
Inventor's Signature								Da	te	
Residence: City		State			Country			Citizen	ship	
Post Office Address					_					
Post Office Address							_			
City		State			ZIP		Cou	ntry		
Name of Addition	al Joint Inventor, if any	y:			A petition	on has been file	ed for th	nis unsign	ed inv	entor
Given Na	me (first and middle [if any]	)			Family Name or Surname					
Inventor's Signature		1	1					Da	ite	
Residence: City		State			Country			Citizer	nship	
Post Office Address					<u>.</u> .				,	· - · · · · · · · · · · · · · · · · · ·
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